Atty. Docket No.: 2134CONCIPPCTUS (203-2402CONCIPPCTUS

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s):

Buysse, et al.

Examiner: Diane Yabut

Serial No .:

10/516,480

Group: Art Unit 3734

Filed:

October 5, 2005

Dated: April 17, 2007

For:

LAPAROSCOPIC BIPOLAR ELECTROSURGICAL INSTRUMENT

Mail Stop: Amendment

Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

OTHER THAN

AMENDMENT TRANSMITTAL FORM

Sir:

Transmitted herewith is an amendment in the above-identified application.

- Small entity status of this application under 37 C.F.R. § 1.9 and 1.27 has been established by a verified statement previously submitted.
- A verified statement to establish small entity under 37 C.F.R. § 1.9 and 1.27 is enclosed. []
- No additional fee is required. [X]

The fee has been calculated as shown below:

	(Col. 1) CLAIMS REMAINING AFTER AMENDMENT		(Col. 2)	(Col. 3) SMALL ENTITY			SMALL ENTITY		
			HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDIT.	OR	RATE	ADDIT. FEE
TOTAL	17	MINUS	20	= 0	X 25	\$	×	50	\$0
INDEP.	2	MINUS	3	=	X 100	\$	X	200	\$0
☐ FIRST PRESENTATION OF MULTIPLE DEP. CLAIM						\$	×	360	\$0
				ADDIT. F	TOTAL	\$ -0-	OR 1	OTAL	\$0

<sup>\*</sup> If the entry in Co. 1 is less than entry in Col. 2, write "0" in Col. 3.

box in Col. 1 of a prior amendment or the number of claims originally filed.

CERTIFICATE OF MAILING UNDER 37 C.F.R. §1.8(a)

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail, postpaid in an envelope, addressed to the: Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on date below.

Dated: <u>4-/1-07</u>

May Jo melacek

<sup>\*\*</sup> If the "Highest No. Previously Paid for" IN THIS SPACE is less than 20, enter "20".

<sup>\*\*\*</sup> If the "Highest No. Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The Highest No. Previously Paid For" (Total or indep.) is the highest number found in the appropriate

- Please charge Deposit Account No. <u>21-0550</u> in the amount of \$\_\_\_. Two (2) copies of this sheet are enclosed.
   A check in the amount of \$\_\_\_\_ is enclosed.
- [X] Please charge any deficiency as well as any other fee(s) which may become due under 37 C.F.R. § 1.16 and/or 1.17 at any time during the pendency of this application, or credit any overpayment of such fee(s) to Deposit Account No. <u>21-0550</u>. Also, in the event any extensions of time for responding are required for the pending application(s), please treat this paper as a petition to extend the time as required and charge Deposit Account No. <u>21-0550</u> therefor. TWO (2) COPIES OF THIS SHEET ARE ENCLOSED.

Respectfully submitted,

Thomas A. Beaton Reg. No. 46,543

Attorney for Applicant(s)

United States Surgical A division of Tyco Healthcare Group LP 195 McDermott Road North Haven, CT 06473 303-581-6831



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## AMENDMENT UNDER 37 C.F.R. §1.111

In response to the Office Action mailed on January 24, 2007, please amend the above-identified application as follows:

Amendments to the Specification begin on page 2 of this paper.

Amendments to the Drawings begin on page 4 of this paper.

Amendments to the Claims begin on page 5 of this paper.

Remarks/Arguments begin on page 10 of this paper.

OPR/FINANCE

## CERTIFICATE OF MAILING UNDER 37 C.F.R. §1.8(a)

I hereby certify that this Amendment and any document referred to as enclosed herein is being deposited with the United States Postal Service as first class mail, postpaid in an envelope, addressed to Mail Stop: Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on April 17, 2007.

Dated: April 17, 2007.

Mary Jo Milacek